GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2091
ANSWERED ON:06.05.2016
Neo-natal and Maternal Mortality
Hari Shri G.

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a quarter of world"s neonatal deaths and 15 percent of maternal deaths are recorded in India, if so, the reaction of the Government thereon;

(b) whether exercise of holding meetings with women on health issues brought down neo-natal death rates in five remote districts of Jharkhand and Odisha, if so, the details thereof;

(c) whether the Government has issued a circular to 10 States with a high burden of neo-natal and maternal mortality to emulate the meeting approach to bring down newborn baby deaths; and

(d) if so, the details thereof and outcome thereon?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE
(SHRI JAGAT PRAKASH NADDA)
(a): Yes. As per the UN Inter−Agency Estimates, India contributes to 27% of global neonatal deaths and 15% of the maternal deaths. Government of India recognises the fact that the health of the mother has an important bearing on the health of the child. Thus interventions for improvement of maternal health are critical for improving survival of newborn. Besides this health of adolescent population also determines the health of the mother. Therefore, the "continuum of care approach" in the form of Reproductive, Maternal, Newborn, Child and Adolescent Health Strategy (RMNCH+A strategy) has been adopted under the National Health Mission.

(b): As per the results of trial, titled "Effect of participatory women's groups facilitated by Accredited Social health Activist on birth outcomes in rural eastern India: A randomised control trial" published in the Lancet Global Health Journal 2016, 31% reduction in neonatal mortality was observed in areas with participatory women's groups among the randomised clusters in the states of Jharkhand and Odisha. The intervention groups discussed and prioritised maternal and newborn health problems, identified strategies to address them, implemented strategies and assessed their progress Home care practices like wrapping of the baby within 10 minutes of births and placing baby on mother's skin also showed significant improvements in intervention clusters.
(c) & (d): Yes, a communication has been sent to the States of Assam, Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Meghalaya, Odisha, Rajasthan, Uttarakhand and Uttar Pradesh on 4th January, 2016 to use the Participatory Learning and Appraisal (PLA) method in community action to reduce maternal, newborn and child mortality. A note on training design and strategy has also been shared with the States.
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